TOGBIZ2 (09-06)
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U.S. Patent and Trademato (Che U.S. DEPARMENT OF COMMENCE
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)		
FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		102003/13		
Application Number 10/569,825	para serojij	Filed August 27,	2004	
For OPERATING FREQUENCY REDUCTION FOR	TRANSVERSAL	FIR FILTER		
Art Unit		Examiner		
This is a request under the provisions of 37 CFR 1.136(a) application.	to extend the perio	d for filing a reply in the a	bove identified	
The requested extension and fee are as follows (check tin	ne period desired a	nd enter the appropriate f	ee below):	
	Fee	Small Entity Fee		
Ω One month (37 CFR 1.17(a)(1))	\$120	\$60	\$_60.	
Two months (37 CFR 1.17(a)(2))	\$450	\$225	s	
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	s	
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	s	
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	s	
Applicant claims small entity status. See 37 CFR 1.2	7.			
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is atta	ched.			
The Director has already been authorized to ch	arge fees in this a	pplication to a Deposit	Account.	
The Director is hereby authorized to charge any Deposit Account Number 501456	I have	enclosed a duplicate	copy of this sheet.	
WARNING: Information on this form may become public, Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
χ attorney or agent of record. Registration Number <u>53,881</u>				
attorney or agent under 37 CFR /Registration number if acting under 3	1.34. 7 CFR 1.34			
D. / Jaran		February 1.	2007	
Signature		1-613-788-2244		
Daphne L. MARAVEI Typed or printed name		Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one				
signature is required, see below. Total of 2 forms are s	ubmitted.			
This collection of information is required by 37 CFR 1.136(a). The informat USPTO to process) an application. Confidentiality is governed by 35 U.S.	ion is required to obtain of C. 122 and 37 CFR 1.11	r retain a benefit by the public wand 1.14. This collection is estin	hich is to file (and by the nated to take 6 minutes to	

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complex, including pathering, preparing, and submitting the concletions application form to the USPTID. Time will vary depending upon the individual case. Although comments on the amount of time you require to complete this time and/or supportings for reducing this bushers, should be serve to the Chief Information Officer, U.S. Petert and Thedemark Office, U.S. Department of Commence, P.D. Box 1490, Assandrist, V.R. 2315-4450, DO NOT SEND FEES OR COMPLETED FORMSTO THIS ADDRESS SEND TO: Commissioner for Patient, P.D. Disc 1450, Assandrist, V.R. 22315-4450, DO NOT SEND FEES OR COMPLETED FORMSTO THIS ADDRESS SEND TO: Commissioner for Patient, P.D. Disc 1450, Assandrist, V.R. 22315-4450, DO NOT SEND FEES OR COMPLETED FORMSTO THIS ADDRESS SEND TO: Commissioner for Patient, P.D. Disc 1450, Assandrist, V.R. 22315-4450, DO NOT SEND FEES OR COMPLETED FORMSTO THIS ADDRESS SEND TO: Commissioner for Patient, P.D. Disc 1450, Assandrist, V.R. 22315-4450, DO NOT SEND FEES OR COMPLETED FORMSTO THIS ADDRESS SEND TO: Commissioner for Patient, P.D. Disc 1450, Assandrist, V.R. 22315-4450, DO NOT SEND FEES OR COMPLETED FORMSTO THIS ADDRESS SEND TO: Commissioner for Patient, P.D. Disc 1450, Assandrist, V.R. 22315-4450, DO NOT SEND FEES OR COMPLETED FORMSTO THIS ADDRESS SEND TO: Commissioner for Patient, P.D. Disc 1450, Assandrist, V.R. 22315-4450, DO NOT SEND FEES OR COMPLETED FORMSTO THIS ADDRESS SEND THIS ADDRESS